

## CENTERS FOR DISEASE CONTROL AND PREVENTION

FINANCIAL MANAGEMENT OFFICE
FY 2002 CDC BUDGET REQUEST • FACT SHEET

## CDC PROGRAM AND STAFFING LEVELS

	FY 2000 Actual	FY 2001 Enacted	FY 2002 Request	Request +/- Enacted
Program Level	\$3.342 billion	\$4.202 billion	\$4.093 billion	-\$109 million
FTE	7,862	8,165	8,267	+102

The FY 2002 budget requests a total of \$4.1 billion for the Centers for Disease Control and Prevention (CDC), a net decrease of \$109 million, or 3%, below FY 2001. This request includes \$122 million in program increases, offset by reductions of \$231 million, and \$127 million in Public Health Service evaluation interagency transfer funds for activities related to Health Statistics.

The Children's Health Act of 2000 called for CDC to establish a new Birth Defects and Developmental Disabilities Center, which will carry out a range of activities previously funded in Environmental Health, including prevention of autism, fetal alcohol syndrome, and spina bifida. The FY 2002 budget proposes \$76 million, an increase of \$11 million for these programs.

The budget includes \$575 million for chronic disease prevention and health promotion, a decrease of \$175 million, or 23%, below FY 2001. This reflects \$27 million in reductions to programs that received one-time funding in FY 2001, not continuing a new \$125 million youth media campaign, and an additional \$27 million reduction, offset by \$4 million for cost of living increases.

\$137 million is requested for environmental disease prevention, including \$3 million in program increases, offset by \$4 million in reductions to programs receiving one-time funding in FY 2001. CDC supports a comprehensive environmental health program that includes assessments of human exposure to toxic contaminants, prevention of asthma and childhood lead poisoning, public health genetics, and emergency response to chemical and radiological disasters.

The budget proposes \$80 million, an increase of \$3 million above FY 2001, for the **Epidemic Services** and **Response Program**. Funds will support training, such as the Field Epidemiology Training Program,

which prepares public health practitioners in other countries to detect and respond to disease outbreaks.

A program increase of \$5 million over the FY 2001 level is requested for health statistics for a total of \$127 million. The National Center for Health Statistics conducts several surveys, along with research and analytic programs, that provide information critical to monitoring the dynamics of health and health care and also provide the underpinnings for biomedical research, health policy, and public health practice.

The budget includes \$1.1 billion for prevention and control of HIV/AIDS, sexually transmitted diseases and tuberculosis, an increase of \$24 million over FY 2001. Within the increase, \$20 million is for domestic and international prevention of HIV/AIDS. The budget contain an \$11 million increase for CDC's domestic HIV/AIDS prevention activities, including expanded local efforts that will increase the number of people who know their HIV status and link infected individuals to prevention, care and treatment services. To combat global AIDS, the budget contains a total of \$117 million, an increase of \$12 million above FY 2001. It is estimated that 22 million people in sub-Saharan Africa are infected with HIV and cumulative AIDS deaths in the region total over 12 million, which is more than 80% of all reported AIDS deaths since the epidemic started.

The immunization budget is \$575 million in discretionary appropriations to CDC. The budget requests an increase of \$1 million for global immunization activities including polio eradication, \$14 million for vaccine purchase, \$4 million for vaccine safety, and \$1 million for research.

The infectious disease budget activity supports efforts to reduce emerging infectious and foodborne diseases, improve patient safety, and provide laboratory support for HIV/AIDS, tuberculosis, and

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immunization programs. CDC will use part of the \$16 million increase to work with the Agency for Healthcare Quality and Research, the Food and Drug Administration, and the Health Care Financing Administration to develop a unified reporting system for partnering hospitals to make it easier for providers to communicate information on adverse events. CDC will use information it receives through the Sentinel Patient Safety Network to help reduce hospital-acquired infections.

The budget contains \$144 million for injury prevention, an increase of \$4 million over FY 2001. This amount includes \$45 million previously funded through the Crime Bill and displayed as part of the Preventive Health and Health Services Block Grant.

Occupational safety and health requests an increase of \$7 million over the FY 2001 level. This increase will support the National Occupational Research Agenda (NORA), the National Institute for Occupational Safety and Health's research program developed cooperatively with academic centers and industry.

The budget also includes \$135 million for the Preventive Health and Health Services Block Grant, the same level as FY 2001.

The new Public Health Improvement budget line funded at \$110 million brings together cross-cutting activities, such as the National Electronic Disease Surveillance System, for improving the overall public health system. Funds also will support CDC's Public Health Practice Program Office, which provides training and performance measurement of public health activities at the state, local and national level; the Racial and Ethnic Approaches to Community Health (REACH 2010) demonstration projects, which seek to eliminate racial disparities in health in areas including chronic and infectious diseases; and Prevention Research.

Buildings and Facilities is funded at \$150 million, with a priority focus on constructing an infectious disease laboratory, an environmental laboratory, and in FY 2003, a communication and training facility. CDC's laboratories are relied upon worldwide to help control disease outbreaks and prevent illness and injury. The laboratories house one of the two

official reference samples of smallpox, and analysis at these labs was instrumental in identifying the first cases of West Nile Virus found in North America.

CDC is engaged in an on-going, aggressive strategy for **improving financial management** of its disease prevention programs. The FY 2002 budget includes \$4 million to replace CDC's aging accounting system with an enterprisewide business solution. Additional funds will support management training activities to continue skills development of financial staff.

The budget includes \$182 million for CDC's bioterrorism preparedness. This amount includes \$13 million in program increases, offset by \$12 million in reductions to programs that received one-time funding in FY 2001. The budget also earmarks \$77 million, a \$10 million increase, for state and local bioterrorism preparedness, including funding for epidemiological and laboratory enhancements, the detection of outbreaks, and the Health Alert Network, CDC's effort to provide Internet connectivity to community public health departments. Another \$10 million will continue to support national planning efforts and the development of a bioterrorism action plan. Funds totaling \$22 million are to be used for continued development of a rapid toxic screen to identify up to 150 chemical threats; additional training for the Epidemic Intelligence Service; and increased biological lab capacity. The budget proposes \$52 million for the National Pharmaceutical Stockpile and \$18 million to continue research on the anthrax vaccine.

The Agency for Toxic Substances and Disease Registry (ATSDR) is managed as part of CDC and performs public health activities related to Superfund Toxic Waste sites. The budget includes \$78 million for ATSDR, an increase of \$4 million over the FY 2001 level. ATSDR is funded through the Veterans Affairs, Housing and Urban Development appropriations subcommittee.

The FY 2002 President's Budget includes a **revised budget structure** for CDC that more closely aligns funding with the centers, institute, and offices that manage these programs. The budget display reduces the number of activity lines from 19 to 15 and reduces the number of subactivities by an estimated 70%.